|  |  |
| --- | --- |
| **Il sottoscritto (The undersigned; Owner name)** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Codice fiscal** |  | **nato a (Country born in)** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **il (Date of birth)** |  | **e residente in (Resident of)** |  |

|  |  |
| --- | --- |
| **alla via (Address)** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **c.a.p. (Zip code)** |  | **Tel. (Telephone)** |  |

chiede, giusto quanto disposto dalla L. 281/91, l'iscrizione all'anagrafe canina del proprio cane/gatto:

(He/She requests the provisions of L. 281/91 for the registration of his dog / cat)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| razza **(breed)** |  |  | sesso **(sex)** |  |
| data di nascita **(dob)** |  |  | taglia **(size)** |  |
| mantello **(color)** |  |  | segni particolari **(special markings)** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sterilizzato (sterilized)** | **NO** | **SI** | **Il (date)** |  |

|  |  |
| --- | --- |
| **Nome del cane/gatto (name of dog/cat)** |  |

dichiara le seguenti informazioni sulla provenienza dell'animale (Declares the following information about the animal's origin):

|  |
| --- |
|  |
|  |

dichiara di essere a conoscenza dei seguenti obblighi de legge (L.R. 3/2019) (Declares to be aware of the following legal obligations):

* denunziare, entro 3 giorni, la morte o lo smarrimento del soggetto; (Report, within 3 days, the death or loss of the pet;)
* denunziare, entro 5 giorni, la variazione della propria residenza o il trasferimento di proprieta' del cane/gatto. (Report, within 5 days, the owner’s change of address or the change of ownership of the dog/cat)

|  |  |  |  |
| --- | --- | --- | --- |
| **Data (date)** |  | **FIRMA (owner signature)** |  |

|  |  |
| --- | --- |
| **documento di riconoscimento (identification document)** |  |

|  |  |
| --- | --- |
|  | **Microchip assegnato (microchip number)** |

Si autorizza il trattamento dei dati personali ai sensi del G.D.P.R. 679/2016 e del D.L.vo 101 del 10 agosto 2018 (The processing of personal data is authorized pursuant to the G.D.P.R. 679/2016 and of Legislative Decree 101 of 10 August 2018)

|  |  |  |  |
| --- | --- | --- | --- |
| **ASL Il Veterinario**  **(ASL veterinarian)** |  | **FIRMA (signature)** |  |